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Governor

STATE OF NEVADA  
CANNABIS COMPLIANCE BOARD

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HON. MICHAEL DOUGLAS  
Chair

TYLER KLIMAS  
Executive Director

**Agent Card Designee Change Request Form**

*Designee is the individual authorized to receive and provide information regarding establishment Agent Cards. Changes to the Designee may be requested by the current Designee or current Point of Contact (POC) on record with the Board. The person being appointed as the new Designee must have a current agent card for each type of establishment for which he/she is being appointed Designee. **This form must be hand-signed. Electronic signatures will not be accepted.** Submissions may be e-mailed, however it is not recommended as e-mail may not be secure.*

*Email: [CCBLicensing@ccb.nv.gov](mailto:CCBLicensing@ccb.nv.gov)*

*Mail: Cannabis Compliance Board, Attn: Agent Cards, P.O. Box 1948, Carson City, NV 89701*

Cannabis Establishment ID #: \_\_\_\_\_ (Example: D026) TID # \_\_\_\_\_

Cannabis Establishment Official Name: \_\_\_\_\_

Current Designee Name: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**New Designee Information**

Name: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Establishment Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*I APPROVE CHANGING THE CURRENT DESIGNEE TO THE NEW DESIGNEE*

CURRENT DESIGNEE OR POC NAME: \_\_\_\_\_

CURRENT DESIGNEE OR POC SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

I have attached required government-issued ID for person signing document.

**Internal use only**

Received by:	Received Date:
E-filed & hard copy filed in establishment folder:	Designee has all appropriate agent cards:
Designee added to list by:	Change date: